

JC682 U.S. PTO
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PTO/SB/05 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

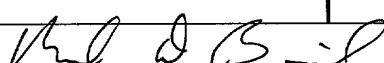
Attorney Docket No. 16869S030500

First Inventor

Hagawara, Yoshinobu

Title METHOD OF DETECTING AND MEASURING A MOVING OBJECT AND APPARATUS THEREFOR, AND A RECORDING MEDIUM FOR RECORDING A PROGRAM FOR DETECTING AND MEASURING A MOVING OBJECT

Express Mail Label No. EL695656039US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning design patent application contents.</small>		ADDRESS TO Assistant Commissioner for Patents Box Patent Application Washington, DC 20231																	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 44] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) [Total Sheets 15]</p> <p>5. Oath or Declaration [Total Pages 1] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper number of pages c. <input type="checkbox"/> Statements verifying identity of above copies</p>																	
ACCOMPANYING APPLICATIONS PARTS																			
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R.§3.73(b)Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (2)</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent</p> <p>17. <input type="checkbox"/> Other:</p>																			
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)</p> <p>Prior application information: Examiner _____ of prior application No: _____ / Group Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																			
19. CORRESPONDENCE ADDRESS																			
<p><input checked="" type="checkbox"/> Customer Number or Bar Code Label 20350 or <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Name</td> <td colspan="3"></td> </tr> <tr> <td>Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> <td></td> </tr> </table>				Name				Address				City	State	Zip Code		Country	Telephone	Fax	
Name																			
Address																			
City	State	Zip Code																	
Country	Telephone	Fax																	
Name (Print/Type)	Mark D. Barrish																		
Signature																			
Date	July 31, 2001																		

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 710)

Complete If Known	
Application Number	
Filing Date	
First Named Inventor	Hagawara, Yoshinobu
Examiner Name	
Group Art Unit	
Attorney Docket No.	16869S-030500US

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number	20-1430
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Deposit Account Name
 Townsend and Townsend and Crew LLP

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	
101	710	201	355
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
SUBTOTAL (1)			(\$710)

2. EXTRA CLAIM FEES

Total Claims	-20**	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims	13	=	0	X	\$18	=	\$0
Multiple Dependent	3	-3**	=	0	X	\$80	= \$0
				X		=	

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
103	18	203
102	80	202
104	270	204
109	80	209
110	18	210
SUBTOTAL (2)		(\$0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify)			

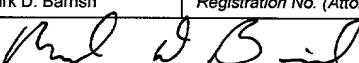
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*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

SUBMITTED BY

Name (Print/Type)	Mark D. Barrish	Registration No. (Attorney/Agent)	36,443	Telephone	650-326-2400	Complete (if applicable)
Signature				Date	July 31, 2001	

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